

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/508412

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS | | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 10 minus 20 = | - |
| INDEPENDENT CLAIMS | / minus 3 = | - |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

| SMALL ENTITY TYPE | OTHER THAN OF SMALL ENTITY |
|-------------------|----------------------------|
| RATE | Fee |
| BASIC FEE | |
| XS 9= | |
| X43= | |
| +145= | |
| TOTAL | 970 |

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------|--|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA |
| Total | * | Minus | ** = |
| Independent | * | Minus | *** = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| SMALL ENTITY | OTHER THAN OF SMALL ENTITY |
|------------------|----------------------------|
| RATE | ADDITIONAL FEE |
| XS 9= | |
| X43= | |
| +145= | |
| TOTAL ADDIT. FEE | 970 |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------|--|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA |
| Total | * | Minus | ** = |
| Independent | * | Minus | *** = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| XS 9= | |
| X43= | |
| +145= | |
| TOTAL ADDIT. FEE | 970 |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------|--|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA |
| Total | * | Minus | ** = |
| Independent | * | Minus | *** = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9= | |
| X43= | |
| +145= | |
| TOTAL ADDIT. FEE | 970 |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.